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CERTIFICATE OF MAILING

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ASSISTANT COMMISSIONER FOR PATENTS, WASHINGTON, D.C. 20231,
ON 24 MAY 2001

Audrey Boyd
May 24, 2001

DATE

Attorney Docket No.: B45070-1

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Friede, et al. May 24, 2001

Serial No.: 09/819,464

Filed: March 28, 2001

For: "Vaccines"

Assistant Commissioner for Patents
Box Missing Parts
Washington, D.C. 20231

RESPONSE TO NOTICE TO FILE MISSING PARTS OF APPLICATION
FILING DATE GRANTED

Sir:

This letter is in response to the "Notice to File Missing Parts of Application - Filing Date Granted" mailed on May 7, 2001 which indicated that the signatures of the inventors on the Declaration for the subject patent application are missing. A copy of "The Notice to File Missing Parts of Application - Filing Date Granted" is enclosed.

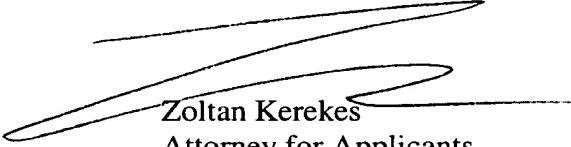
Enclosed please find a Declaration and Power of Attorney for the subject patent application which has been fully executed by the inventors of the subject patent application in compliance with 37 C.F.R. 1.63.

Please charge the \$130.00 surcharge for late filing of the fully executed declaration to Deposit Account No. 19-2570.

The May 7, 2001 communication indicates that an additional claim fee(s) of \$270 is required for the multiple dependent claim surcharge. Please note this claim fee was already included in the original filing fee as indicated on the Utility Patent Application Transmittal form. Applicants enclose a copy of the Transmittal form for your information.

Please charge any additional requisite fees for filing the enclosed Declaration and Power of Attorney as well as additional claim fees or credit any over-payment to Deposit Account No. 19-2570. A copy of this form is enclosed.

Respectfully submitted,



Zoltan Kerekes
Attorney for Applicants
Registration No. 38,938

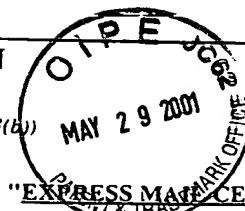
GLAXOSMITHKLINE
Corporate Intellectual Property - UW2220
P.O. Box 1539
King of Prussia, PA 19406-0939
Phone (610) 270-5024 Fax (610) 270-5090
Response to Notice to File Missing Parts.doc

**UTILITY PATENT APPLICATION
TRANSMITTAL**

(For new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.
First Name Inventor

B45070-1
Friede, et al.



"EXPRESS MAIL CERTIFICATE"

"EXPRESS MAIL" MAILING LABEL NUMBER **EL737870707US** DATE OF DEPOSIT: **28 March 2001**

I hereby certify that this paper or fee and the papers indicated as being transmitted herewith are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date and with the Mailing Label Number indicated above and addressed to: The Assistant Commissioner for Patents, Box Patent Application, Washington, D.C. 20231.

NAME OF PERSON MAILING PAPER OR FEE
(TYPE OR PRINT) **GlaxoSmithKline**

SIGNATURE

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

- | | |
|--|---|
| 1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to Deposit Account No. 19-2570 | 7. <input checked="" type="checkbox"/> The Title of the Invention:
Vaccines |
| <input checked="" type="checkbox"/> General Authorization to charge any and all fees under 37 CFR 1.16 or 1.17, including petitions for extensions of time, relating to this application. (37 CFR 1.136(a)(3))
<i>(Submit an original, and a duplicate for fee processing)</i> | 8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <ul style="list-style-type: none"> a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies d. <input type="checkbox"/> Use the identical computer-readable form filed in Application No. _____, filed _____ as the computer-readable form for the instant application. (37 CFR 1.821(e)) |
| 2. <input checked="" type="checkbox"/> The total fee is calculated as shown below: | 9. <input type="checkbox"/> ACCOMPANYING APPLICATION PARTS <ul style="list-style-type: none"> a. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS) b. <input checked="" type="checkbox"/> PTO-1449 c. <input checked="" type="checkbox"/> Copies of all IDS Citations |
| Basic Filing fee \$710.00
Total Claims 49 - 20 = 29 x \$18 \$522.00
Independent Claims 9 - 3 = 6 x \$80 \$480.00
<input checked="" type="checkbox"/> Multiple Dependent Claim present. \$270 \$270.00
TOTAL FILING FEE \$1982.00 | 10. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) |
| <input type="checkbox"/> Cancel in this application original claims <u>to</u> <u>of</u> the prior application before calculating the filing fee. | 11. <input checked="" type="checkbox"/> Prior Applications are Assigned to:
SmithKline Beecham Biologicals s.a.
<i>(for continuation/divisional with Box 17a completed)</i> |
| <input checked="" type="checkbox"/> Charge \$1982.00 to the above indicated Deposit Account. | 12. <input type="checkbox"/> Preliminary Amendment [Total Pages] |
| 3a. <input checked="" type="checkbox"/> Specification excluding Drawings [Total Pages] 40 | 13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)
<i>(Should be specifically itemized)</i> |
| 3b. <input checked="" type="checkbox"/> Abstract on a separate sheet [Total Pages] 1 | 14. <input type="checkbox"/> Certified Copy of Priority Document(s)
<i>(if foreign priority is claimed)</i> |
| 4. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) [Total Sheets] 10 | 15. <input checked="" type="checkbox"/> Transfer all references cited by Applicants or by the Examiner from the parent Application Serial Nos. 08/945,450 filed December 12, 1997 and 09/269,383 filed April 2, 1999 . A PTO-1449 listing the references is enclosed. |
| 5. <input checked="" type="checkbox"/> Declaration and Power of Attorney [Total Pages] 3 <ul style="list-style-type: none"> a. <input type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d))
<i>(for continuation/divisional with Box 17a completed)</i> c. <input checked="" type="checkbox"/> Unsigned Declaration
<i>[Note Box 6 below]</i> <ul style="list-style-type: none"> i. <input type="checkbox"/> DELETION OF INVENTOR(S)
Signed statement attached deleting inventor(s) named in the prior application. see 37 CFR 1.63(d)(2) and 1.33(b). | 16. <input type="checkbox"/> Other: _____ |
| 6. <input type="checkbox"/> Incorporation By Reference (<i>useable if Box 5b is checked</i>)
The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 5b. is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein. | |
| 17. <input checked="" type="checkbox"/> Priority Information. <i>check appropriate box and supply the requisite information</i> | |
| a. The accompanying application is a <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input checked="" type="checkbox"/> Continuation-in-part (CIP) of prior application Nos: 08/945,450 filed December 12, 1997 and 09/269,383 filed April 2, 1999 . | |
| b. <input type="checkbox"/> Benefit is claimed under Title 35, United States Code, Section 119(e) of the following Provisional Applications: Application No. filed _____ | |
| c. <input checked="" type="checkbox"/> Please amend the specification by inserting before the first line the sentence: (37 CFR 1.78)
This is a continuation-in-part of application Serial Nos. 08/945,450 filed December 12, 1997 , which is a 371 of International Application No. PCT/EP96/01464 filed April 1, 1996 , which claims priority of GB 96910019.7 filed April 1, 1996 , and GB 9508326.7 filed April 25, 1995 , and: and 09/269,383 filed April 2, 1999 , which is a 371 of International Application No. PCT/EP97/05578 filed September 30, 1997 , which claims priority of GB 9620795.6 filed October 5, 1996 . | |

18. CORRESPONDENCE ADDRESS

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King of Prussia, PA 19406-0939
Telephone (610) 270-5024 Fax (610) 270-5090

19. RESPECTFULLY SUBMITTED.

Signature _____
Name **Zoltan Kerekes**
Registration No. **38,938**



UNITED STATES PATENT AND TRADEMARK OFFICE

X3
COMMISSIONER FOR PATENTS
UNITED STATES PATENT AND TRADEMARK OFFICE
WASHINGTON, D.C. 20231
www.uspto.gov

APPLICATION NUMBER	FILING/RECEIPT DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NUMBER
09/819,464	03/28/2001	Martin Friede	B-45070-1

CONFIRMATION NO. 1150
FORMALITIES LETTER



OC00000006048898

GLAXOSMITHKLINE
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P. O. Box 1539
King of Prussia, PA 19406-0939

Date Mailed: 05/07/2001

NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION

FILED UNDER 37 CFR 1.53(b)

Filing Date Granted

An application number and filing date have been accorded to this application. The item(s) indicated below, however, are missing. Applicant is given **TWO MONTHS** from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

- Total additional claim fee(s) for this application is \$270.
 - \$270 for multiple dependent claim surcharge.
- The oath or declaration is unsigned.
- To avoid abandonment, a late filing fee or oath or declaration surcharge as set forth in 37 CFR 1.16(e) of \$130 for a non-small entity, must be submitted with the missing items identified in this letter.
- **The balance due by applicant is \$ 400.**

*A copy of this notice **MUST** be returned with the reply.*

Customer Service Center

Initial Patent Examination Division (703) 308-1202

PART 2 - COPY TO BE RETURNED WITH RESPONSE

05/31/2001 BN/GUYEN/1 00000028 192570 09819464

01 FC:105	130.00 CH
02 FC:104	270.00 CH